

BEST AVAILABLE COPY

03/03/2006 11:55 FAX 9192868199

MOORE-VAN-ALLEN

**RECEIVED
CENTRAL FAX CENTER**

001/004

MAR 03 2006

FACSIMILE**Moore & Van Allen**

FROM	Michael G. Johnston
DATE	March 3, 2006
TIME	

Michael Johnston
Registered Patent AttorneyT 919 286 8037
F 919 416 8337
mikejohnston@mva-law.com

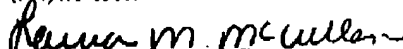
PAGES INCLUDING COVER SHEET	4	USER NUMBER	8308
CLIENT/MATTER	040665-000009		

Moore & Van Allen PLLCSuite 500
430 Davis Drive
PO Box 13706
Research Triangle Park, NC 27709**Courier:**
Suite 500
430 Davis Drive
Morrisville, NC 27560

- ☒ NO CONFIRMATION COPY OF THIS FACSIMILE WILL BE SENT.
☐ A CONFIRMATION COPY OF THIS FACSIMILE WILL BE SENT VIA REGULAR MAIL.
☐ A CONFIRMATION COPY OF THIS FACSIMILE WILL BE SENT VIA OVERNIGHT MAIL.
☐ A CONFIRMATION COPY OF THIS FACSIMILE WILL BE SENT VIA CERTIFIED MAIL.

Attention:

	NAME	COMPANY	TELEPHONE	FACSIMILE
1	Commissioner for Patents	USPTO		(571)273-8300
2				
3				
4				
5				
6				
7				

Remarks:Application No.: 10/816,283
Filing Date: April 1, 2004
First Named Inventor: Robert James Johnson
Attorney Docket: 040665-000009**CERTIFICATE OF FACSIMILE
MAILING**I hereby certify that this Correspondence is being sent
via facsimile to the Commissioner for Patents, US
Patent Office, on March 3, 2006, to the fax number
(571)273-8300.
Laura M. McCullen

To comply with certain U.S. Treasury regulations, we inform you that, unless expressly stated otherwise, any U.S. Federal tax advice contained in this fax, including attachments, is not intended or written to be used, and cannot be used, by any person for the purpose of avoiding any penalties that may be imposed by the Internal Revenue Service.

IF FAX IS ILLEGIBLE OR INCOMPLETE, PLEASE CALL _____ AT 919 286 8180 OR 800 333 3729.

Unless otherwise indicated, a facsimile machine printout of this document shall be considered an original counterpart of the document, and a writing with the sender's signature, if any, printed thereon deemed an original signature. The information contained in this facsimile message is attorney privileged and confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is wrongful and may subject you to civil liability. If you have received this communication in error, please immediately notify us by telephone, and return the original message to us at the above address via the U.S. Postal Service. Thank you.

Charlotte, NC
Charleston, SC

MAR 03 2006

PTO/SB/21 (09-04)

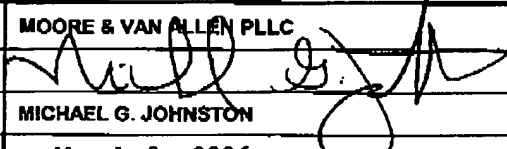
Approved for use through 07/31/2006. OMB 0651-0031

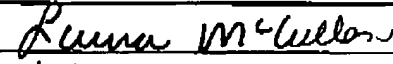
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/816,283
	Filing Date	April 1, 2004
	First Named Inventor	Robert James Johnson
	Art Unit	3751
	Examiner Name	FETSUGA, ROBERT M
	Attorney Docket Number	040665-000009
Total Number of Pages in This Submission		3

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement Under 37 CFR 3.73(b)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MOORE & VAN ALLEN PLLC		
Signature			
Printed Name	MICHAEL G. JOHNSTON		
Date	March 3, 2006	Reg. No.	38,194

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted (571-273-8300) to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	LAURA McCullen	Date	3-3-06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

MAR 03 2006

PTO/SB/82 (04-06)

 Approved for use through 11/30/2005. OMB 0851-0035
 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/816,283
Filing Date	April 1, 2004
First Named Inventor	Robert James Johnson
Art Unit	3751
Examiner Name	FETSUGA, ROBERT M
Attorney Docket Number	040665-000009

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

24,239

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

24,239

OR

☐ Firm or
Individual Name **Moore & Van Allen PLLC**

 Address **PO Box 13706
430 Davis Drive**

 City **Research Triangle Park** State **NC** Zip **27709**
Country **US**Telephone **919-286-8000**

Email

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
SIGNATURE of Applicant or Assignee of Record

Signature

Name

Jeff Rosenberg

Assistant Secretary

Date

February 1, 2006

Telephone (678) 746-2556

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. see below.

☒ *Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: Robert James Johnson

Application No./Patent No.: 10/816,283

Filed/Issue Date: April 1, 2004

Entitled: Emergency Eye Wash System

ENCON Safety Products Inc., a

Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 014790, Frame 0584, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

February 1, 2006

Date

Assistant Secretary

Telephone number

(678) 746-2556

Title

Jeff Rosenberg

Typed or printed name

[Signature]

Signature

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

TRI1620972v1